

**ECONOMIC AFFAIRS IC
JUNE 11, 2012
EXHIBIT 16**

EAIC QUESTIONS FOR APRIL 20 / JUNE 11, 2012:

Please answer as many as you can for the April 20 meeting, just as they apply to the Board of Medical Examiners (except for the last question), and the rest can be answered in June:

- **Provide a summary of the physician licensing process (new applications and renewals)**

A physician applying for a Montana physician license must submit to the Board:

1. A completed Montana application for licensure
or
A completed Federation of State Medical Boards "Uniform Application" (UA) with "Montana addenda" (inc. questions about past practice history)
2. Verifications of all physician licenses the applicant has held in other states. (This can be done either by the applicant providing verifications, using the commercial "VeriDoc" service, or by using the Federation of State Medical Boards' "Federation Credential Verification Service" (FCVS)
3. Certificate of Medical Education and Postgraduate Training Verification
4. A DEA Query form
5. A National Practitioner Data Bank "self-query"
6. U.S. military DD-214 discharge paper (if applicable)
7. Medical exam scores
8. Three character references (**NOTE: The Board eliminated this requirement at its May 17-18 meeting.**)
9. A passport-size photograph
10. Certification of foreign medical training (if a foreign graduate.)
11. An application fee of \$325, payable by check or money order

Once an application is received, the applicant is notified that it has been received. The application then is placed in a "queue" for review by an application specialist. Applications are reviewed in the order they are received.

If any elements are missing or if further information is required on any subject, the application specialist notifies the applicant. E-mail is preferred for this, but postal mail also is used, notably if the applicant does not provide an e-mail address.

If necessary, application specialists follow up with additional letters/e-mails 30, 60 and 90 days after the "received" date.

Once the application is declared "complete" by the application specialist, it can follow one of these paths:

*A "routine" application (one with no issues of qualifications or past history) can be approved—and the license issued—by the application specialist without Board review.

*A "non-routine" application with only minor deviations also can be approved by the application specialist. The Board sets specific criteria for this and has expanded those criteria in recent months, potentially allowing more applications to be approved by staff without Board review.

*A "non-routine" application with significant issues is referred to an individual Board member for review. In this process, the application specialist prepares a summary sheet for the Board's Program Manager, who then contacts a Board member and reviews the application based on the summary. The Board member may approve the application and authorize licensing, or may refer the application to the full Board for review at its next meeting.

(NOTE: Application specialists now can contact Board members directly without having to involve the Program Manager or prepare a summary sheet. Summaries will be created only when a non-routine application goes to the full Board for review.)

*The Board reviews "non-routine" applications at its regularly-scheduled meetings. (6 per year.) In rare cases, the Board may choose to hold a special meeting to review applications. For each case, the Board is provided with the complete application file in its "Board book."

In each case, the applicant is invited to attend the meeting and engage the Board. (In some cases, the Board requires the applicant's presence.) The Board may approve, deny, or postpone consideration of an application, request further information or take any other action it deems appropriate.

*At any time, the Board may request staff to conduct its own investigation into an applicant. The Board also may ask for a consultation with the Montana Professional Assistance Program prior to full Board review.

A physician wishing to renew a license for another two-year period has two options:

- 1) Online renewal (formerly with e-pass, now through the BSD "e-Biz" website—this includes the option of payment by credit card or "e-check")
- 2) A paper renewal form—this must be accompanied by a check or money order

- **provide a list of questions an applicant must answer**

Enclosed (or attached to e-mail) separately.

- **what is the average length of time over the past 3 years to process a new application once it is considered complete?**

<u>FY</u>	<u>Physicians</u>	<u>Telemed</u>
2008	19.1 days	6.4 days
2009	11.9 days	5.3 days
2010	16.8 days	3.0 days
2011	26.3 days	3.5 days
2012	2.3 days*	2.5 days

*Through Jan. 18. This does not include any "non-routine" applications still pending Board action.

It is possible for a "routine" application to be declared "complete" and a license issued that same day.

For a "non-routine" application referred to the full Board for review, the time between "complete" and "issued" will depend on when in the Board's meeting cycle the application was declared complete.

In rare cases, additional time may be taken if an applicant fails to appear before the Board for a scheduled application review. In such cases, the Board may postpone the review until its next meeting, when the applicant might be available.

- **how many applications were delayed in the last year until licensure verification was documented from other states? Is verification done electronically or otherwise (please specify how)? Do other states have licensee lookup systems that can be used to speed the process?**

In most instances, physician applications do not arrive with all verifications included, so some delay occurs with almost all applications.

The applicant is responsible for providing license verifications to the Board in the application process. This can be done in multiple ways:

- 1) The applicant may request verification documents from the states in which he/she has been licensed and send those documents to the Board.
- 2) The applicant can use the Federation's FCVS to provide verifications directly to the Board. This service can be time-consuming and costs the applicant \$300.
- 3) The applicant can use VeriDoc or other credentialing entities to seek verifications and provide them directly to the Board.

In any case, a verification document is required by the Board for every license held by the applicant, past or present.

The Board is aware that other states offer online verification services similar to "Licensee Lookup." Board policy has been to follow 37-3-309 and its requirement that the burden of proof is on the applicant to provide all necessary information:

37-3-309. Application for license. A person desiring a license to practice medicine shall apply to the department on an approved form. The application must be accompanied by the license fee and documents, affidavits, and certificates necessary to establish that the applicant possesses the qualifications prescribed by this chapter apart from an examination required by the board. The burden of proof is on the applicant, but the department may make an independent investigation to determine whether the applicant possesses the qualifications and whether the applicant has committed unprofessional conduct. The applicant shall provide necessary authorizations for the release of records and information pertinent to the department's inquiry.

- **what is the number of nonroutine applications? What is the major reason, if any, they are nonroutine?**

BSD's licensing database does not make a distinction between a routine and non-routine application.

In calendar 2010, 33 non-routine applications came before the full Board in a public meeting for review.

In calendar 2011, that number fell to 18.

In calendar 2012, through the Board's May meeting, 13 non-routine Physician applications have come before the Board.

Staff estimates six non-routine applications are referred to, and approved by, individual Board members per month.

An application may be non-routine if the application specialist finds:

- *Disciplinary actions from another state.

- *Multiple malpractice cases, including unresolved cases. **(NOTE: The Board at its May 17-18 meeting agreed that staff shall not count malpractice cases in which the physician was dismissed as a defendant, or that took place during the applicant's medical education and/or residency.)**

- *Significant gaps in practice history that do not involve routine maternity leave.

- *No certification by a specialty board.

- *Any insufficiencies in education or post-graduate training, including residency.

- *Alleged violations of civil or criminal law, including significant traffic violations.

- **what is the average length of time to process nonroutine applications?**

BSD's licensing database does not make a distinction between a routine and non-routine application.

The Department's physician application form states "Non-routine applications may take up to 120 days to process."

- **what is the average length of time to process nonroutine applications once they are considered complete?**

BSD's licensing database does not make a distinction between a routine and non-routine application.

Non-routine applications are referred to an individual Board member within a few days after they are declared "complete." If the Board member approves a particular application, licensing happens quickly.

If a Board member refers the application to the full Board for review, the additional time may be up to 7 weeks, depending on how close to a scheduled Board meeting the application is declared "complete."

Non-routine applications that are approved either by a Board member or by Board motion at a public meeting result in the issuance of a license within a few days.

A small number of non-routine applications are tabled or consideration is postponed for reasons determined by the Board.

- **what is the average length of time over the past 3 years to process a renewal?**

In the vast majority of cases, renewals take only minutes to accomplish online. This was true when licensees used e-pass; the same is true of "e-Biz." Paper renewals received by staff generally are processed the day they arrive. Payment is deposited on that day.

- **what is the number and type of new applications and the number of renewals over the past 3 years?**

The following is a report on both Physician applications and renewals, as well as Rural Resident (RES) applications (which are not renewed)

YEAR	PHYS Apps	PHYS Renewals	RES Apps
FY 2008	295	3774	23
FY 2009	311	1799	28
FY 2010	311	1986	20
FY 2011	321	1916	35
FY 2012	174	2351	12

- **what is the number of applications denied over the past 3 years?**

Only 2 Physician applications have been denied from FY 2008-2012. No Telemedicine applications have been denied.

- **how many applications have been withdrawn?**

From FY 2008-2012, 123 Physician applications have been withdrawn. During that same time period, 7 Rural Resident application and 3 Telemedicine applications have been withdrawn.

- **what is the number of telemedicine applications and the time spent to process them?**

<u>YEAR</u>	<u>Applications</u>	<u>Ave. Days (Receipt to Issuance)</u>
FY 2008	54	69.1
FY 2009	31	67.7
FY 2010	23	70.2
FY 2011	13	90.9
FY 2012	9	58.4

- **are all applications reviewed by the board?**

No.

- **are all applicants interviewed by the board? If not, which ones?**

No. Only those "non-routine" applicants who are referred to the full Board by a Board member once the application is declared "complete."

- **is there a common reason for interviews?**

The Board of Medical Examiners prefers to engage all "non-routine" applicants referred to it. In fact, the Board has postponed consideration of an application because the applicant is unable or unwilling to appear in person or via telephone.

Issues that lead to "non-routine" applications and Board interviews include past disciplinary issues, multiple malpractice cases, personal behavior issues, past substance abuse, gaps in practice history, past sexual behavior, civil or criminal justice cases.

- **what are the main reasons for denial of an application or renewal?**

In general, unprofessional conduct or inadequate qualifications for licensure. The Board rarely denies a license outright; more often, it will offer the applicant the chance to withdraw the application within a certain time or face denial.

Renewals are not denied, even when an applicant acknowledges an issue during the most recent license period. The renewal continues and the Board follows up on the acknowledged issue, filing a complaint with its Compliance specialist if necessary.

- **are there additional fees beyond licensing fees for an application?**

No, only the application fee itself. However, if an applicant is re-entering active practice after a lengthy hiatus, the Board may require the applicant go through a private sector re-entry program that brings a cost to the applicant separate from any fee paid to the department.

- **what are the allowable methods of fee payment?**

For applications, check or money order only. Once online applications are available for physicians (perhaps later in 2012, but no specific date has been identified) credit card payments will be accepted.

For paper renewals sent to the Board office, check or money order only.

For renewals done online, credit card or "e-check" only.

- **are there methods of communication with an applicant? (to inform of incomplete application, set up interviews, verify receipt of application? Other?)**

Board staff communicates via postal mail and e-mail, often in combination. Staff also responds to phone calls from applicants.

- **what are the complications for reciprocity with other states?**

The Board currently does not use reciprocity as a means to physician licensure.

- **are there ways an applicant can learn the status of an application during the process?**

Yes, an applicant can call for the Board office for a status update. This happens regularly.

- **what are the complications of paper versus electronic submissions and processing?**

With physician applications, the licensing software is set up to replicate the Montana paper application as closely as possible. Federation "Uniform Applications" do not match up with the software. As a result, the application specialist must take additional time to enter information from a UA into the licensing database.

At present, online applications are not available. However, the Business Standards Division will begin creating online applications in calendar 2012 for its licensing Boards.

- **what are the other stumbling blocks to a speedier application process?**

In almost every case, delays in processing applications occur because Board staff is waiting for required information, either from the applicant or from another source.

- **are there short-term and long-term fixes?**

Board staff has reviewed its procedures and will endeavor to notify the applicant by e-mail on the same day the application is received.

"Non-routine" applications that are expected to be complete before a Board meeting now are placed on that meeting's tentative agendas before they actually are complete. If they are not complete in time for the meeting, they will be removed from the agenda.

At its May meeting, the Board granted application specialists more authority to declare applications routine. This should reduce the number of applications that require review by an individual Board member.

In addition, application specialists now will make direct contact with individual Board members for initial review of "non-routine" applications and will not have to prepare summary sheets for the Program Manager. This will save hours of labor on the part of the application specialists, allow the person who knows the application best to communicate with the Board member, and remove one step from the review process.

Also, the Board has removed the requirement that applications include three written character references. This will eliminate the possibility that an application is delayed because character references are missing.

- **how much overtime is put in by processors to meet renewal deadlines?**

During the February-March physician renewal period, the Board's overtime cost was \$4,307.19. By contrast, overtime for December-January was \$1,691.41.

- **have there been additional hires to help process applications?**

No, although a temporary employee who left for another job has been replaced.

- **what staff efforts have there been to inform Board members if there are problems?**

Staff worked with the Board's President following a request by the Montana Medical Association for a report on licensing times. The subject also was part of the Board's March 16, 2012 agenda and its May 17-18 Board meeting. At that latter meeting, licensing staff engaged the Board in direct discussion about physician application processing.

- **what actions have been taken by the Board of Medical Examiners to address delays in licensure?**

Staff has reviewed its process and is committed to making the process as efficient as possible at the front end (receipt of the application) and the back end (issuing the license once the application is complete.)

The Board held a special meeting on May 7 to review six non-routine applications in advance of its regular May 17-18 meeting. As noted earlier, the Board took up the subject of physician license applications at that latter meeting and approved several changes intended to remove obstacles from application processing. They include:

- Removing the requirement for three written character references as part of an application.
 - Waiving the requirement of verification of medical education and post-graduate education for a physician whose post-education practice covers at least ten years and there are no disciplinary issues or other "red flags" during that entire period.
 - Removing from consideration malpractice cases filed during the physician's time of medical education and/or residency.
 - Removing from consideration malpractice cases in which the physician was dismissed as a defendant.
 - Allowing an applicant to be licensed if the only "red flag" is a single incident of academic probation during medical education.
 - Allowing an applicant to be licensed if the only "red flag" is a single motor vehicle violation for not having proof of insurance.
 - Allowing an applicant to be licensed if the only "red flag" is a gap in practice because of maternity leave of six months or less.
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- **how does the BOME process compare to other states regarding processing time, communication, use of electronics, reciprocity, implementing expedited licensure processes, and related issues?**

I have surveyed Montana's immediate neighboring states and learned the following:

WYOMING

- Issues 6-month temporary (provisional) license issued once the following is received/checked:
 - *Completed application
 - *NPDB Self-Query
 - *FSMB Board Action Review (checked by staff)
 - *Application fee
- 90% of applicants receive temporary license / 80% are licensed within one week
- Temporary license becomes permanent after references and verifications (FCVS) received
- Board approves permanent licenses as a group

IDAHO

- Licensing can take 1-8 months, depending on how long applicant takes to furnish information
- Length almost always depends on applicant

SOUTH DAKOTA

- Tracks time from "complete" to "final approval" (not from "receipt")
- Upon completion, provisional issued until next Board meeting; Board makes final decision
- Typical time frame from completion to approval: 50 days
- Application closes after 120 days if still incomplete

NORTH DAKOTA:

- No available timeframe stats; best guess is 90 days on average
- Locums license available—staff approves
- Temporary provisional issued upon FBI background check and license verifications

- **what benefits will the reorganization provide to the application/renewal process?**

The primary benefit will be that more employees will be trained to process physician applications. This should insure that if an application specialist is ill, on vacation, or otherwise absent, work on physician applications will continue without interruption.

- **has the department prorated reorganization costs to all boards? What is that cost?**